HIGHLIGHTS

- 96 security incidents were registered, with 166 people killed (10 children).
- 8,646 SAM children were admitted to the severe acute malnutrition program, including 1,284 in hard-to-reach areas.
- 29,740 children aged 6-23 months received micronutrient supplementation in the Nord and Centre-Nord regions.
- 12,525 children aged 9 months to 14 years were vaccinated in the health districts of Diapaga, Gayeri, Pama and Fada.
- A national nVPO2 campaign was conducted with the Ministry of Health which reached 4,200,000 children under 5, including 519,000 children in the high-risk and insecurity-affected areas.
- 103,866 people (including 63,196 children) were provided with access to safe drinking water.

SITUATION IN NUMBERS

- 2,842,000 Children in need of humanitarian assistance
- 4,900,000 People in need of humanitarian assistance
- 1,810,105 Internally displaced persons registered
- 5,574 Schools closed (21.44% of all schools)

UNICEF RESPONSE AND FUNDING STATUS*

<table>
<thead>
<tr>
<th>Health</th>
<th>Measles vaccination</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>164%</td>
<td>16%</td>
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<table>
<thead>
<tr>
<th>Water, sanitation</th>
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</tr>
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<tbody>
<tr>
<td></td>
<td>54%</td>
<td>21%</td>
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</table>

<table>
<thead>
<tr>
<th>Child protection</th>
<th>Psychosocial access</th>
<th>Funding status</th>
</tr>
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<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Children in school</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>114%</td>
<td>27%</td>
</tr>
</tbody>
</table>

* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING STATUS (IN US$)**

- $31.8M UNICEF APPEAL 2022
- $130.1M US $180.9M

- $14.1M Humanitarian Resources
- $4.9M 2021 carry over
- $27M Other Resources
- $111.7M Funding gap

** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.
In line with the 2022 UNICEF Humanitarian Action for Children (HAC) appeal, the total amount of funding received at the end of November 2022 was US$50.17 million (28 per cent of the US$180 million required). UNICEF Burkina Faso would like to recognize the generous support of key partners, who have contributed US$45.3 million in 2022, out of which US$13.5 million came from non-humanitarian contributions, and US$4.8 million from the HAC 2021. UNICEF also recognizes the flexible and unearmarked funding of US$5,885,000 received in 2022 from the Global Humanitarian Thematic Fund.

During the month of November 2022, the regions most affected by the humanitarian crisis were the Sahel, Centre-Nord, Nord, Est, Boucle du Mouhoun and Centre-Est. The activities of unidentified armed groups (UAGs) in several locations resulted in the closure of additional schools and health centers and the isolation of an increasing number of localities. Ninety-six security incidents were registered during the reporting period, with 166 people killed (10 children).

The mobility of the civilian population remains extremely limited due to attacks and irregular controls on the various roads. During the reporting period, UAGs carried out attacks in the towns in Dori and Djibo in the Sahel region, Bittou in the Centre-Est region, Fada in the Est region, and Tougan in the Boucle du Mouhoun region. Massive internal displacement remains widespread, with 1,810,105 IDPs registered as of 30 November 2022 according to the government body in charge of the registration (CONASUR).

Humanitarian access is still a major challenge and by the end of November the humanitarian access working (GTA) group identified 23 towns and localities as isolated, estimating that between 800,000 and 900,000 people (60.37 per cent children) are unable to leave these locations, and are without access to essential supplies or markets.

The humanitarian crisis has severely reduced access to essential social services in affected areas, particularly in the wash, education and health sectors. As of end of October 2022, 606 out of 1,448 health facilities were either closed (196) or providing minimum services (410) in the eight most affected regions, depriving almost 2 million people, including over 400,000 children under 5, of access to health services. Meanwhile, 5,574 schools were closed (22 per cent of the country’s formal schools), affecting more than 1 million children (49 per cent girls) and 29,000 teachers (32 per cent women). Only 161,000 out of 1,057,149 IDP children are enrolled in public schools so far. According to the WASH cluster, from January to October 2022, a total of 52 attacks on water points took place in 23 different localities, and in 7 localities, water services were disrupted due to attacks on electricity pylons. A total of 848,230 people lost their access to drinking water due to these attacks.

In November 2022, UNICEF continued to support curative, preventive and promotional health interventions in order to cover the needs, especially in the areas affected by the crisis.

Due to UNICEF’s support, 12,525 children aged 9 months to 14 years were vaccinated in the health districts of Diapaga, Gayeri, Pama and Fada, (in the Est region), including 4,920 against measles during vaccine reconstitution campaigns, bringing the total number of children vaccinated against measles in 2022 to 289,549 (i.e. 166 per cent of the initial HAC target). The training of Community Based Health Workers (CBHWs) on the delegation of immunization tasks, availability of solar refrigerators and the transportation of vaccines by UNHAS in landlocked areas such as Pama and Tita facilitated the resumption of immunization activities temporarily interrupted in these areas. To respond to the polio epidemic, a national nVPO2 campaign was conducted with the Ministry of Health which reached 4,200,000 children under 5 (109 per cent of the target), including 519,000 children in the insecure areas.

As part of integrated community case management (ICCM), 37,459 children under 5 (including 19,479 girls and 17,980 boys) were treated by CBHWs (trained, equipped and supplied with drugs) in the six regions affected by humanitarian crisis, resulting in the treatment of 20,537 cases of malaria, 5,955 cases of diarrhea and 10,967 cases of pneumonia. In addition, thanks to the extension of community interventions in the hard-to-reach areas of the Diapaga and Gayeri districts, community volunteers and CBHWs reached 6,637 children under 5 (including 2,650 from IPD and 3,987 from host communities). To prevent maternal and neonatal mortality in emergency affected areas, 3,261 mothers/newborns received home visits at the community level by CBHWs in hard to reach areas in the Sahel, Nord and Est regions. In Fada health district, 126 newborns received emergency care in the maternity and neonatology departments within 72 hours of delivery. Finally, in the Sahel regional hospital, 29 maternal deaths and 93 neonatal deaths were audited to reinforce maternal and perinatal death surveillance.

Overall, 47,483 women and children under 5 years of age (out of 48,016 planned for November) received various health care services in the humanitarian regions with 85 percent of the planned HAC target achieved.

To ensure the continuity of health services at the institutional level in remote areas, emergency kits (1 IEHK2017, kit, suppl.1-medicines, 10 IEHK2017, kit, basic unit, 2 Midwifery kit, 1drugs, 2 Midwifery kit, 3-renewable) were delivered via UNHAS to the health districts of Sebba, Djibo, Titaо and Diapaga. These kits will provide care for over 20,000 people and 100 deliveries.

In the area of malaria prevention, UNICEF provided two long-lasting insecticide-treated mosquito nets to 560 displaced households (22.63 per cent of the target) in emergency affected areas. This low result is mainly due to the lack of funding and a campaign for the universal distribution of mosquito nets was organized in the country under the coordination of the Ministry of Health.

Major challenges hindering emergency preparedness and response activities in the health sector include access constraints due to persisting insecurity, the departure of health workers from insecure areas, the increased pressure on health centers in host communities, the restricted displacement of CBHWs in some villages for promotional and preventive activities, and the low level of completeness of data.

**Funding Overview and Partnerships**

**Situation Overview and Humanitarian Needs**

**Summary Analysis of Programme Response**

**Health**
Nutrition
In November 2022, 8,646 new SAM children (4,496 girls and 4,150 boys) were treated, including 1,284 SAM children treated at the community level with simplified approaches or through advanced health outposts. This increases the total number of SAM children treated since January 2022 to 97,556, representing 64 per cent of the annual target (152,510). The performance rates remain good according to SPHERE standards with a recovery rate of 91.8 per cent, a mortality rate of 2.1 per cent and a default rate of 6.1 per cent.

A total of 28,351 new pregnant and lactating women with children under 2 years in the Est, Sahel, Centre-Nord, Nord, Boucle du Mouhoun and Plateau central regions benefited from promotion and counselling sessions on optimal infant and young child feeding (IYCF) practices and hygiene thanks to UNICEF’s support in partnership with international and local NGO partners (Save the Children International, SEMUS, LVIA, GRET, IBFAN, Tin-Tua, TdH), increasing the annual coverage rate from 83.8 per cent to 89.4 per cent.

In addition, 51,439 mothers were trained in MUAC measurement and edema research at home resulting in the screening of 88,606 children aged 6-59 months, the identification of 2,253 MAM children and the referral of 520 SAM children to nutrition services. Furthermore, 209 health personnel and 1,820 CBHWs and volunteers were trained on IYCF, and 6,944 mother-to-mother support groups were set up for scaling up IYCF. Finally, 29,740 children aged 6-23 months received micronutrient powder in the Nord and Centre-Nord regions.

Thanks to UNICEF’s support, during the reporting period, 10 managers from the directorates of the Ministry of Health and 26 managers from the 13 Regional Health Directorates (Regional Directors and Nutrition Focal Points) were trained on the simplified IMAM protocol under the lead of the Nutrition Directorates. At the end of the training, the 17 health districts in which the simplified protocol will be implemented were identified. Fifty-six health workers from the Pama and Gayeri health districts (Est) and 633 CBHWs from Dori, Sebbia and Djibo (Sahel) were trained on the simplified protocol for the management of acute malnutrition. Thirty-one members of the health district management teams were also trained on the integrated package of IYCF services in Centre-Est region.

Child protection, GBVIE and PSEA
UNICEF and its partners continue to provide humanitarian assistance to prevent and respond to abuse, exploitation, neglect and violence against children and their families. During the reporting period, 21,096 children (11,725 girls) including 185 (96 girls) children with disabilities and 993 guardians (655 women) benefitted from mental health interventions and psychosocial support in child-friendly spaces (fixed and mobile), as well as across communities. This brings the number reached since January 2022 to 202,757, including 187,155 children (102,022 girls) and 15,602 guardians, which represents 34 per cent of the annual target. This low achievement is due to limited resources available for the child protection emergency response.

For individualized care of vulnerable children through the case management system, 121 (68 girls) identified unaccompanied and separated children (UASC) benefited from services provided by UNICEF’s implementing partners. This brings the total number of UASC assisted since the beginning of the year to 2,171 (1,259 girls), representing 34 per cent of the annual target. Of these UASC, 333 children (139 girls) were reunited with their families.

Seventy-five child protection actors were trained on the Monitoring and Reporting Mechanism for the six grave violations of children’s rights (MRM 1612) in the armed conflict contexts in the Centre-Nord and Boucle de Mouhoun regions. In addition, 13,596 people including 7,625 children (4,119 girls) and 5,671 adults (3,574 women) were reached by different messages on the mitigation and prevention of gender-based violence (GBV). This brings the number of people reached since January 2022 to 116,891, or 195 per cent of the annual target. This overachievement can be attributed to the mobile child protection strategy implemented since the beginning of the year which has allowed UNICEF to reach more people than expected despite the limited budget.

During this reporting period, 15,356 people (5,759 girls, 3,097 boys, 4,547 women and 1,953 men) were identified as having access to safe and accessible channels to report cases of sexual and economic exploitation, bringing the cumulative result to 59,786 people reached or 99.6 per cent of the annual target. Furthermore, 188 survivors (63 girls, 123 women and 2 boys) of GBV were supported to access multi-sectoral support services, and 245 women and girls benefited from dignity kits.

Education
In November 2022 5,574 schools were closed (22 per cent of the country’s formal schools), affecting more than 1 million children (49 per cent girls) and 29,000 teachers (32 per cent women). Seventy-one per cent of schools in the Est and 86 per cent of schools in the Sahel regions are closed. In November, the number of children enrolled in formal education increased slightly from 2.6 million to 2.9 million, of which 161,000 are displaced children (15 per cent of identified displaced children).

With a shortage of 1,700 teachers in Burkina Faso, a significant number of teachers refuse to return to their posts even when they move to safer locations. To compensate and fill the gap, the Ministry of Education has turned to recruiting a number of community teachers, who are expected to exceed 500 volunteers in 2023. This new recruitment requires further training on Education in Emergency (EIE) skills to maintain a minimum standard of quality learning and provide the necessary support to children. However, it is worth highlighting that in Titaou (in the Nord region), 35 volunteers initiated the reopening of schools and recruited more than 7,500 primary and post-primary school age children. To support retention in schools, children urgently need school kits and school canteens.

With the support of UNICEF’s partners, 200 children (49 per cent girls) received individual school kits; 1,050 children benefited from newly installed classrooms and equipment; more than 1,307 children (562 girls) from host and displaced communities were integrated into accelerated learning programmes in regular and coranique settings; 11,230 children (6,808 girls) benefitted from distance learning through the radio education programme (REP); and 213 animators (81 per cent women) received training on the safe schools approach (psychosocial support, and development of school emergency preparedness/response plans).

The implementation of the double-shift approach in schools remains a challenge in affected areas, mainly due to the lack of trained teachers and awareness among parents who are more likely to favor a one-shift school. Only 60 schools reported the implementation of the double-shift approach in November (13 schools in the Est and 10 schools in the Sahel regions). At the same time, the lack of road access in some localities continues to pose a major challenge in the Est and Sahel regions, especially since most teachers have moved from these localities and can now only return to schools by
helicopter. Nevertheless, access to basic needs including food and water in these areas remains a major challenge for teachers and children alike. Thus, more efforts are needed to implement the REP where access to learning is extremely difficult.

Water, sanitation and hygiene
During the reporting period, 103,866 people (23,683 women and 63,196 children) were provided with access to safe drinking water, including 96,366 people through water-trucking and the construction and rehabilitation of boreholes in the Nord, the Centre-Nord, and the Sahel regions. Additionally, 31,315 people (7,055 women, 18,811 children) benefited from the installation of safe and appropriate sanitation and waste disposal facilities, and 65,685 people (14,066 women, 40,004 children) were reached through awareness interventions on good hygiene practices, including distribution of critical WASH supplies, in the Nord, Centre-Nord, Sahel and Est regions.

These results account for 2, 4, and 7 per cent of the 2022 Humanitarian Action for Children (HAC) targets for water, sanitation, and hygiene, respectively, and contribute to a 2 per cent increase in sanitation-related interventions and 1 per cent for hygiene interventions. This can be attributed to the large number of latrines constructed during the reporting period (64 latrines constructed in the Nord and Centre-Nord regions; 10 latrines rehabilitated in the Nord region; 40 latrines emptied in the Centre-Nord region), which has allowed UNICEF to reach more people.

More targets are expected to be reached in the coming weeks with the repair of several water points which will help cover some additional water needs. Programme implementation remains challenging and constrained in some regions due to logistical challenges, such as in the Sahel region with major disruptions in the supplies of materials due to attacks on convoys by UAGs, as well as interruptions in land access in certain areas. UNICEF is working with local service providers and implementing partners to find alternative ways to supply materials and equipment, as well as the possibility of using UNHAS freighters as a last resort to facilitate access to certain areas. In addition, funding for humanitarian WASH interventions also remains largely insufficient to deliver additional support to those affected by the humanitarian crisis. UNICEF continues its resource mobilization efforts, despite the challenges, to create conditions for continued action.

Communication for Development (C4D), Community Engagement and Accountability
The following main achievements and results were achieved during the month of November:

Sahel
- 20 members of the community engagement and accountability working group, clusters, and decentralized technical services were trained on accountability in partnership with OCHA.
- 80 representatives of affected communities (religious leaders, customary chiefs, leaders of youth and women's associations) were trained and committed to promoting peace, social cohesion, peaceful coexistence between IDPs and host populations and vaccination against COVID-19.
- 60 representatives of affected communities (community leaders, leaders of youth associations, women and men) were trained on the importance and value of educating girls in times of crisis, GBV and PSEA.

Est
- 20 radio plays were produced and broadcast on key survival messages, behavior change in the various humanitarian response sectors (health, nutrition, WASH, protection, education, cash transfer).
- 40 radio programmes were produced and broadcast on humanitarian response and early recovery, including through feedback mechanisms.
- 200 debates and door-to-door talks were organized by community relays on PSEA and COVID-19

Centre-Nord
- 18 radio games were produced and broadcast in Mooré, French and Fulfulde on access to survival messages, behavior change and the rights of IDPs in the various sectors of the humanitarian response.
- 18 theater forums were conducted on access to survival messages, behavior change and the rights of IDPs in the various response sectors.
- Messages were disseminated by community leaders on the importance of vaccination against COVID-19 and polio.

Nord
- 5 community videos were produced and disseminated on access to actionable messages and factual information and good life-saving practices in the various sectors of the humanitarian response.
- Production and distribution of 1,440 microprograms on peace, social cohesion and fake news
- 50 young U-Reporters were oriented on access to information on the protection of children's rights and PSEA/GBV and vaccination against COVID-19

These interventions made it possible to achieve the following results:
- 745,735 people affected by the humanitarian crisis (including 224,500 women, 230,000 men, 151,235 girls and 140,000 boys) received vital messages and information on the different sectors of the humanitarian response against a monthly target of 250,000 people, (i.e. 298.29 per cent of target).
- 252,400 affected people (74,200 women, 84,300 men, 45,540 girls and 48,360 boys) were able to participate in local communication actions (community dialogues, group talks) for social and behavioral change against a monthly target of 208,333 people (121.15 per cent of target).
- 42,322 people (13,300 women, 25,200 men, 1,822 customary and religious leaders) provided feedback or received information through existing feedback mechanisms against a monthly target of 58,333 people, (i.e. 72.55 per cent of the target).

Youth Engagement
During the reporting period young people remained committed to promoting their rights, children's rights and responding to the humanitarian crisis by contributing to solving challenges that their communities are facing. The following results were achieved:

Centre-Nord region
- The U-Reporters of Barsalogho conducted water trucking in their community, benefitting more than 500 families.
- 15 U-Reporters in Korsimoro conducted psychosocial activities for more than 300 IDP and host community children. These also promoted social cohesion within communities.
15 U-Reporters in Boussouma conducted psychosocial activities for more than 300 IDP and host community children. They also promoted social cohesion within communities.

Haus-Bassins region
- U-Reporters conducted awareness-raising sessions in schools on sexual and reproductive health, HIV and STIs, reaching over 200 students.

Sud-Ouest region
- 20 U-Report communities are carrying out activities on social cohesion and living together as part of the cross-border project between Burkina Faso and Cote d’Ivoire. They conducted 80 talks/sessions during the reporting period.

Sahel region
- U-Reporters were engaged in mobilizing communities for blood donation to help mitigate the shortage of blood in the Sahel region. This is essential to save lives, especially children’s lives. They successfully supported the donation of 35 blood bags.
- 30 U-Reporters in Dori provided psychosocial outreach and mental health support to children

Cascades region
- 20 U-Report communities are carrying out activities on social cohesion and living together as part of the Cross-border project between Burkina Faso and Cote d’Ivoire. They conducted 80 talks/sessions during the reporting period.

Multi-sectoral cash response
In November, UNICEF together with its implementing partner, ensured the preparations for the second and third disbursements of humanitarian cash transfers following the first round of transfers. This activity is planned for mid-December and will cover the critical gaps in terms of basic needs, of 1,500 extremely vulnerable families (750 families in the Centre-Nord and 750 in the Est regions). UNICEF is implementing a targeting approach based on vulnerability (and not status), which has already allowed to assist, with the 1st cash transfers, 1,249 IDP families as well as 251 vulnerable host families (17 per cent of the families assisted)

Limited funding one of the main bottleneck preventing UNICEF from reaching the 10,000 targeted families as per the 2022 HAC target.

In terms of accountability, UNICEF and its partners is working in partnership with the Cash Working Group in Burkina Faso to improve complaints mechanisms in place, as well as addressing authorities’ concerns regarding national coordination on risk analysis and mitigation measures.

Rapid response
In November UNICEF reached 1,400 people (including 840 children) through the provision of essential household items. The interventions were carried out in partnership with local NGOs, and through the Emergency Response Team (ERT) operation with UNHCR/WFP in Loroopeni and Bouroum-Bouroum in the Sud-Ouest region.

Since January 2022, UNICEF has reached 70,905 people (including an estimated 41,125 children) with essential household items, reaching 206 per cent of the annual target. The result is double the HAC 2022 target. This overachievement is due to the following factors:

1) ERT Interagency Operations enable UNICEF and UNHCR to join forces, including stock and partners, therefore jointly reaching more vulnerable people in hard-to-reach or underserved areas due to reduced unit costs
2) Operations via UNHAS’ helicopters, mainly in the framework of the ERT collaboration, obliged UNICEF and UNHCR to negotiate with the Shelter/Non-food items cluster to further reduce the minimum kit due to the limited cargo capacity of the helicopters.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

The overall objective of UNICEF’s humanitarian leadership is to ensure continuity and high coverage of services to vulnerable children and families, in line with UNICEF’s Core Commitments for Children (CCC). UNICEF continues to ensure that its programmes are child-centered, agile, flexible, relevant, risk-informed, and timely in responding to the needs of displaced people and other vulnerable children.

Since January 2022, thanks to its localization approach, UNICEF and its partners reached, almost 120,000 people with a multi-sectoral package of services, in line with its CCCs, in localities at high security risks, which brings the total to almost 197,000 people reached since the beginning of 2021.

Sectors where UNICEF has the role of lead agency continued to see an increase of the magnitude of people in need, while facing a progressive increase of isolated highly vulnerable communities; the spill over of insecurity to regions bordering Benin, Togo and Cote d’Ivoire; and reduced human resources/capacity for coordination due to staff shortages. These challenges continue to be addressed jointly, however, they affect the effective and efficient implementation of UNICEF programmes and the ability to scale up interventions and reach the maximum number of children and people in need.

The Inter-Cluster Coordination Group (ICCG) initiated the consultations for the 2023 humanitarian planning cycle, which was officially launched on 29 September during a national workshop attended by key national/local actors and the government. With the potential worsening of the political crisis due to the recent coup d’état, clusters have been particularly active in updating the list of priority communes, most of which face access constraints due to the activities of UAGs and the increased urbanization of the crisis. Key logistical needs have been identified to support response actors in the timely delivery of essential inputs for an immediate response to the most urgent needs.

Education Cluster

Following the submission of the 2023 HRP, all actors have received training on the HPC Project Module and are expected to submit their projects by mid-December. In the meantime, monitoring of the results achieved by partners in the education sector is ongoing.

Further discussions on the rapid response activities expected from education cluster took place with the partners to accelerate the response and explore more cost-effective options to reach children in need.

Child Protection AoR

In order to provide data related to needs analyses, a validation workshop of the joint Child Protection and Education needs assessment report was organized by the two sectors (Education cluster and CP AoR) with the support of REACH. Thirty-three members (including four women) of community child protection units and regional directors of social action were trained on data collection and reporting of child protection incidents using the Kobo collect application.

WASH Cluster
The WASH Cluster is functional at national level and the sub-national levels in six regions (Sahel, Centre-Nord, Nord, Est, Boucle du Mouhoun et Centre-Est). The WASH cluster analysis contributed to better targeting of priority areas and advocacy with donors and organizations to fill-in critical gaps. The targets of the WASH cluster were changed in August 2022 with the publication of the amendment to the HRP 2022. However, it was in October 2022 that the new targets were taken into account in OCHA’s reporting and in the WASH Cluster 5W.

In addition to regular response monitoring and coordination, key initiatives of WASH cluster coordination in Novembre included: finalization of the Cluster Coordination Performance Monitoring (CCPM) survey, finalization of the 2023 humanitarian response plan, strengthening of PSEA through participation in an inter-cluster workshop and sharing guidelines with members, presentation of a study on barriers to access wash services or people with handicap, training of 05 municipalities on cluster coordination as part of the Nex’Eau project, participation in the GCORR workshop, WASH cluster SAG (strategic advisory committee) meeting to discuss key documents and strategic lines for 2023. Quality assurance is ongoing through the AQA initiative. Key challenges affecting cluster coordination include the worsening of security situation and significant funding gaps in the sector.

Nutrition Cluster

In addition to the development of the 2023 HRP, the nutrition cluster contributed to efforts (alongside the ICCG, under the lead of OCHA).

Updated information on the clusters’ main activities can be found online: Education cluster 10, Health cluster 11, Nutrition cluster 12, WASH cluster. 13

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

During the reporting period, a virtual visit was broadcast to partners and media highlighting UNICEF’s integrated humanitarian response including nutrition prevention and care, access to education, access to water, hygiene and sanitation, cash transfers, mental health and psychosocial and holistic support to vulnerable children in distress. A human interest story on education in emergencies was also published.

Additional multimedia content was posted on social media highlighting the nutrition crisis and the response, access to water, hygiene and sanitation for vulnerable people in areas particularly impacted by the humanitarian crisis. Additional content was also posted on regional and global social media platforms. Moreover, at least 20 national journalists were trained in Kaya, Bobo Dioulasso and Koudougou on the coverage of the humanitarian crisis including the COVID-19 pandemic in Burkina Faso. They produced content raising awareness on the situation of children in Burkina Faso (Burkina 24).

HAC APPEALS AND SITREPS

- Burkina Faso Appeals
  https://www.unicef.org/appeals/burkina-faso

- Burkina Faso Situation Reports
  https://www.unicef.org/appeals/burkina-faso/situation-reports

- All Humanitarian Action for Children Appeals
  https://www.unicef.org/appeals

- All Situation Reports
  https://www.unicef.org/appeals/situation-reports

NEXT SITREP: 16 JANUARY 2023

- UNICEF Burkina Faso website
  https://www.unicef.org/burkinafaso/derniers-communiques-de-presse

- UNICEF Burkina Faso on Facebook
  https://www.facebook.com/unicefburkinafaso/posts/pfbid02Nb7rc9JfuXW9HcqtwA75PNwaNentvPXpmHKNWXooPuxA1FBLf4JTBIndUaTaI

- UNICEF Burkina Faso on Instagram
  https://www.instagram.com/accounts/login/?next=%2Fp%2FClfR1rTfPAI%2F

- UNICEF Burkina Faso on Twitter
  https://twitter.com/UNICEF_Burkina/status/156717142286658561?ss=20&t=LXfwHlqwWz-KuH8r0iYRxAw
## ANNEX A SUMMARY OF PROGRAMME RESULTS

<table>
<thead>
<tr>
<th>Sector</th>
<th>Nutritional Security</th>
<th>Health</th>
<th>Water, Sanitation and Hygiene</th>
<th>Child Protection, GBViE and PSEA</th>
<th>Education</th>
<th>Social Protection</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Disaggregation</td>
<td>Total needs</td>
<td>2022 targets</td>
<td>Total results</td>
<td>Progress</td>
<td>2022 targets</td>
</tr>
<tr>
<td>Nutrition</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary caregivers of children 0-23 months receiving infant and young child feeding counselling in humanitarian settings</td>
<td>Total</td>
<td>560,950</td>
<td>560,950</td>
<td>501,453</td>
<td>▲ 6%</td>
<td>301,823</td>
</tr>
<tr>
<td>Children aged 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>Total</td>
<td>152,510</td>
<td>152,510</td>
<td>97,556</td>
<td>▲ 6%</td>
<td>89,648</td>
</tr>
<tr>
<td>Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children and women accessing primary health care in UNICEF-supported facilities</td>
<td>Total</td>
<td>-</td>
<td>460,085</td>
<td>394,738</td>
<td>▲ 10%</td>
<td>-</td>
</tr>
<tr>
<td>Households that received at least two long-lasting insecticide-treated nets in humanitarian context</td>
<td>Total</td>
<td>-</td>
<td>58,423</td>
<td>13,223</td>
<td>▲ 1%</td>
<td>-</td>
</tr>
<tr>
<td>Children aged 6 months to 14 years vaccinated against measles</td>
<td>Total</td>
<td>-</td>
<td>173,810</td>
<td>284,629</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People accessing a sufficient quantity of safe water for drinking and domestic needs</td>
<td>Total</td>
<td>-</td>
<td>755,000</td>
<td>408,619</td>
<td>▼ -21%</td>
<td>1.3 million</td>
</tr>
<tr>
<td>People use safe and appropriate sanitation facilities</td>
<td>Total</td>
<td>-</td>
<td>800,000</td>
<td>115,837</td>
<td>▲ 4%</td>
<td>1.1 million</td>
</tr>
<tr>
<td>People reached with critical WASH supplies (including hygiene items)</td>
<td>Total</td>
<td>-</td>
<td>950,000</td>
<td>520,245</td>
<td>▲ 7%</td>
<td>1.7 million</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children and parents/caregivers accessing mental health and psychosocial support</td>
<td>Total</td>
<td>-</td>
<td>600,000</td>
<td>202,757</td>
<td>▲ 4%</td>
<td>374,000</td>
</tr>
<tr>
<td>Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
<td>Total</td>
<td>-</td>
<td>60,000</td>
<td>116,891</td>
<td>▲ 19%</td>
<td>-</td>
</tr>
<tr>
<td>People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers</td>
<td>Total</td>
<td>-</td>
<td>60,000</td>
<td>59,786</td>
<td>▲ 26%</td>
<td>-</td>
</tr>
<tr>
<td>Unaccompanied and separated children provided with alternative care or reunified</td>
<td>Total</td>
<td>-</td>
<td>6,000</td>
<td>2,171</td>
<td>▲ 2%</td>
<td>10,200</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children accessing formal or non-formal education, including early learning</td>
<td>Total</td>
<td>-</td>
<td>650,154</td>
<td>744,162</td>
<td>▲ 9%</td>
<td>751,422</td>
</tr>
<tr>
<td>Children receiving individual learning materials</td>
<td>Total</td>
<td>-</td>
<td>214,551</td>
<td>64,676</td>
<td>▲ 2%</td>
<td>751,422</td>
</tr>
<tr>
<td>Social Protection</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households reached with UNICEF funded multi-purpose humanitarian cash transfers</td>
<td>Total</td>
<td>-</td>
<td>10,000</td>
<td>-</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>Sector</td>
<td>UNICEF and IPs response</td>
<td>Cluster/Sector response</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>-------------------------</td>
<td>-------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Indicator</td>
<td>Disaggregation</td>
<td>Total needs</td>
<td>2022 targets</td>
<td>Total results</td>
<td>Progress</td>
</tr>
<tr>
<td></td>
<td>Households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding</td>
<td>Total</td>
<td>-</td>
<td>5,000</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>Rapid Response Mechanism</td>
<td>Displaced and host communities, including people with disabilities, supported with essential household items to cover their urgent needs</td>
<td>Total</td>
<td>35,000</td>
<td>35,000</td>
<td>72,305</td>
</tr>
<tr>
<td></td>
<td>Cross-sectoral (HCT, C4D, RCCE and AAP)</td>
<td>People engaged in risk communication and community engagement actions</td>
<td>Total</td>
<td>-</td>
<td>2.5 million</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>People with access to established accountability mechanisms</td>
<td>Total</td>
<td>-</td>
<td>700,000</td>
<td>-</td>
</tr>
</tbody>
</table>
## ANNEX B FUNDING STATUS

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2022</th>
<th>Other resources used in 2022</th>
<th>Resources available from 2021 (carry over)</th>
<th>Funding gap (US$)</th>
<th>Funding gap (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>20,282,312</td>
<td>11,418,800</td>
<td>31,129</td>
<td>2,237,123</td>
<td>6,595,260</td>
<td>33%</td>
</tr>
<tr>
<td>Health</td>
<td>15,841,381</td>
<td>1,745,058</td>
<td>466,880</td>
<td>396,424</td>
<td>13,233,019</td>
<td>84%</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>55,254,334</td>
<td>9,579,944</td>
<td>636,661</td>
<td>1,313,593</td>
<td>43,724,136</td>
<td>79%</td>
</tr>
<tr>
<td>Child protection and GBVIE</td>
<td>23,288,480</td>
<td>2,166,475</td>
<td>1,218,763</td>
<td>501,044</td>
<td>19,402,198</td>
<td>83%</td>
</tr>
<tr>
<td>Education</td>
<td>54,009,593</td>
<td>2,859,166</td>
<td>11,746,013</td>
<td>124,352</td>
<td>39,280,062</td>
<td>73%</td>
</tr>
<tr>
<td>Social protection and cash transfers</td>
<td>8,106,667</td>
<td>1,855,129</td>
<td>-</td>
<td>-</td>
<td>6,251,538</td>
<td>77%</td>
</tr>
<tr>
<td>Rapid Response and Community Resilience</td>
<td>4,095,000</td>
<td>2,168,837</td>
<td>25,893</td>
<td>295,771</td>
<td>1,604,499</td>
<td>39%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>180,877,767</strong></td>
<td><strong>31,793,409</strong></td>
<td><strong>14,125,339</strong></td>
<td><strong>4,868,307</strong></td>
<td><strong>130,090,712</strong></td>
<td><strong>72%</strong></td>
</tr>
</tbody>
</table>

*repurposed other resources with agreement from donors

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**Hadrien Bonnau**d  
Chief of Communications  
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hbonnau@unicef.org
1. Conseil National de Secours d'Urgence et de Réhabilitation (CONASUR), 15 December 2022
2. Ministère de l'Education Nationale, de l'Alphabétisation et de la Promotion des Langues nationales (MENAPLN), 30 November 2022
3. Germany, SIDA Sweden, Denmark, The United Kingdom, UNOCHA, Japan, France, European Commission (ECHO), Saudi Arabia, the United States Fund for UNICEF, Agence Francaise de Developpement (AFD), Bureau of Humanitarian Assistance /USAID/Food for Peace, the United States of America Permanent Mission / USG and the USA/ Center for Disease Control.
4. Sectoral thematic pools grants, Education Cannot Wait, Global Partnership for Education; The Global Fund, Gates Foundation, Netherland (ASWA II), Japan, European Commission, UNICEF National Committees (France, Japan Canada)
5. Denmark, Luxembourg, GAVI The Vaccine Alliance, Denmark, UNOCHA, The United Kingdom, USAID/Food for Peace, USA (USAID) OFDA, Canadian UNICEF Committee, Germany, USA CDC, Saudi Arabia, Japan, France, and the European Commission Humanitarian Aid & Civil Protection (ECHO).
6. Cluster Health Bulletin N.31 - August 2022
7. WASH Cluster database, 2022
8. The amount transferred, based on the gap to cover basic needs, varies between regions. For the Centre-Nord, each vulnerable family has received 93,000 XOF (146 USD) and for the East region, the contextualized amount is 82,000 XOF (129 USD).
9. The increase compared to previous months is due to the August operations, but also to a thorough revision and update, particularly, of data from ERT joint operations, carried out throughout the year.
14. Cluster nutrition targets are lower than UNICEF targets because in line with the HRP, which only targets 171 municipalities (out of 352 municipalities in Burkina Faso)
15. CPAoR targets are lower than UNICEF targets because they are in line with the HRP, which only targets 111 municipalities (out of 352 municipalities in Burkina Faso)
16. The education cluster made a specific effort in November to optimize partners' reporting. In addition, an adjustment was made within the links of appropriate activities reported to specific indicators such as "children accessing EF and NFE", which indicates the actual number of children receiving services matching those indicators.
17. Update of Education Cluster target to match original HRP 2022 target